



College of Physicians and Surgeons of British Columbia

# 2015-2018 Strategic Plan

## Non-Hospital Medical and Surgical Facilities Program

All committees of the College are expected to align their activities with the Board's strategic plan and to advise the Board of progress towards implementing the plan.

The Non-Hospital Medical and Surgical Facilities Program's (NHMSFP) three-year strategic plan was developed by the NHMSFP Committee and approved by the College Board.

### MISSION STATEMENT

Improving public safety through excellence in non-hospital medical and surgical facilities accreditation

## Objective 1

*Strengthen the role of the medical director.*

### GUIDING PRINCIPLE

Quality assurance is an integral and essential component of the work of the NHMSFP. Ensuring physicians working in non-hospital medical/surgical facilities (NHMSFs) are competent is critical in establishing and upholding standards for the delivery of safe patient care. This is a core responsibility of the medical director of the facility.

### STRATEGIES

1. Finalize the NHMSFP medical director standard that clearly defines credentialing and privileging responsibilities (at the time of a physician's initial application for privileges and ongoing performance reviews documented at annual reapplication).
2. Develop and implement education session for medical directors and provide ongoing peer support and education.
3. Explore opportunities for the medical directors of NHMSFs and the NHMSFP Committee to access the provincial CACTUS databases for purposes of appointment and reappointments of medical staff.
4. Continue to explore access to the provincial patient safety learning systems to facilitate medical directors to report and manage patient safety incidents easily and electronically.
5. Complete revisions to the NHMSFP sections of the College Bylaws to ensure they support the medical director responsibilities and quality assurance activities in ensuring physicians remain competent.

## Objective 2

### *Enhance communication and engagement with key partners.*

#### **GUIDING PRINCIPLE**

Effective, collaborative relationships with NHMSFP stakeholders are critical in establishing and upholding standards for the delivery of safe patient care in non-hospital medical and surgical facilities.

#### **STRATEGIES**

1. Promote public and physician awareness of the role of physician self-regulation and the College's legislated responsibility for the accreditation of NHMSFs.
2. Develop and implement a NHMSFP communications plan to facilitate effective communication and ongoing information sharing between the NHMSFP and its key stakeholders. Communication tools will include education sessions for medical directors, website, communiques, *College Connector* and the Annual Report.
3. Develop and implement a plan for the public to have access to information regarding accredited NHMSFs that is meaningful, accurate and gives the public confidence in the accuracy of any claims about accreditation certification status.
4. Schedule regular meetings with senior leadership teams (Ministry of Health, health authorities, NHMSF medical directors, and others) to promote transparency of the NHMSFP activities, collaboration, support for and understanding of the NHMSFP and stakeholders roles and responsibilities.
5. Expand partnerships with other health regulatory organizations (HROs).
6. Develop a NHMSFP public profile that has the endorsement of key NHMSFP stakeholders.
7. Promote stakeholder awareness of the NHMSFP strategic objectives.
8. Improve public, physician and facility access to NHMSFP information through the website.
9. Promote stakeholder awareness and positive perceptions of the NHMSFP QA activities.

## Objective 3

### *Strengthen the role of the committee.*

#### **GUIDING PRINCIPLE**

The College carries out its regulatory functions through its committees comprised of clinical experts and public members. To ensure the committee is able to carry out its mandate it must understand its role and function, have the necessary information, and actively participate in decision-making.

#### **STRATEGIES**

1. Improve data collection on facilities and on the performance of facilities and report these to the committee.
2. Identify and manage risk.
3. Enhance NHMSFP Committee responsibilities in reviewing physician applications for privileges.
  - Develop and implement clear privileging and credentialing processes and procedures.
  - Provide the necessary education and training to ensure committee member consistency in the review of applications.
  - Adopt the provincial privileging dictionaries.
4. Enhance the committee's responsibilities in patient safety incident reviews.
  - Develop renewed process for patient safety incident reviews using the Canadian Patient Safety Institute (CPSI) guide.
  - Educate members of the committee about patient safety incident reviews.
  - Consider a subcommittee to function as the review panel.
5. Draft a working document that clearly identifies stakeholder roles.
6. Implement mechanisms for the committee to review itself.
  - Conduct annual committee evaluation.
  - Conduct review of committee members by the committee chair.
7. Create working groups to improve efficiency of the committee (credentialing and privileging, patient safety incident reviews).
8. Complete revisions of the NHMSFP sections of the College Bylaws.

# Objective 4

## Strengthen the role of the program.

### GUIDING PRINCIPLE

Regulatory excellence requires high-functioning supports in information technology, business processes and human resources.

The NHMSFP develops, supports and stewards information technology, human resources, legal, communication and finance activities that maximizes efficiency, transparency and effective decision-making.

### STRATEGIES

1. Expand stakeholder engagement to change perceptions.
  - Develop and implement a NHMSFP communications plan to facilitate effective communication and ongoing information sharing between the NHMSFP and its key stakeholders. Communication tools will include education sessions for medical directors, website, communiques, *College Connector* and the Annual Report.
  - Continue to work with stakeholders to ensure accreditation processes and NHMSFP performance conforms to best practices.
2. Improve transparency of decisions.
  - Schedule regular meetings with senior leadership teams (Ministry of Health, health authorities, NHMSF medical directors, and others) to promote transparency of the NHMSFP activities, collaboration, support for and understanding of the NHMSFP and stakeholders roles and responsibilities.
3. Develop and implement a risk mitigation plan for resolution of outstanding heating, ventilating and air conditioning (HVAC) issues.
4. Improve program efficiency through technology.
  - Develop and implement e-accreditation reporting capabilities for trends, compliance rates, and areas for improvement.
  - Expand online access through website enhancements.
  - Evaluate iMIS and e-accreditation to determine what best meets program's needs.
5. Improve program effectiveness through renewed business processes.
  - Develop and implement annual operational plans and KPIs.
  - Develop a rolling five-year financial plan for stakeholders which outlines estimated annual fee increases and accreditation costs.
  - Ensure the five-year plan includes an annual 5% contingency contribution working towards achieving a nine-month operating reserve.
  - Schedule monthly meetings with the finance department to review NHMSFP budget and review variances with a commitment to stay cost neutral.
  - Develop and implement a three-year human resource plan.
  - Develop and implement a quality document management system.
6. Develop and implement an orientation and on-going professional development plan for accreditors.
7. Adopt and implement the provincial patient safety learning system for the review and tracking of patient safety incidents.